**Abortion in a Global Context**



**QUIZ QUESTIONS**

1. Globally, approximately what percentage of pregnancies are unplanned?

* 10%
* 20%
* 40%
* 80%

1. Which of the following can be done to address unsafe abortion?

* Training on the use of manual uterine aspiration for medical providers
* Revisions of restrictive abortion laws
* Accessible post-abortion care services
* Use of harm reduction models (such as providing information to more safely self- induce abortions)
* All of the Above

1. Which of the following is false?

* Misoprostol causes uterine contractions, the opening of the cervix, and vaginal bleeding
* Misoprostol is only 40% effective in causing complete abortion when used vaginally in repeated doses
* In several countries in Latin America, abortion-related mortality has declined as use of misoprostol has become more prevalent
* In Brazil, complications have been noted to be less common with reporting use of misoprostol compared to other invasive methods
* None of the above

1. The overall rate of abortion is approximately \_\_\_\_\_\_\_\_\_ in countries with more restrictive abortion policies compared to countries with less restrictive abortion policies.

* Higher
* Lower
* The same
* There is not enough evidence to suggest a conclusion to overall abortion rates

1. Which of the following is true?

* Policymakers and healthcare managers working to provide reproductive health services should always ensure that safe abortion care is readily accessible and available to the full extend of the law
* Abortion laws and services should protect the health and human rights of all women, including adolescents
* Abortion is one of the most investigated topics
* Providers and networks have protocols and guidelines for safety, based on evidence
* All of the above

1. The WHO lists four indicators for safe abortion care: Availability, Quality, Information, and Outcome/Impact. Which of the following is an example of the quality indicator for safe abortion care?

* Access within two hours of where they live to a facility
* Number of providers per certain number of women in the community
* Number of service areas that provide evidence-based and safe abortion care
* Number of clinicians and women who accurately know the legal status of abortion in their country
* Maternal mortality due to unsafe abortions

1. Even in countries where abortion is legal (such as Colombia after 2006), what are challenges women face to obtaining safe abortions?

* Abortion legislation is confusing and women may not know abortion is legal, failing to seek timely care
* Evidence of coerced sex is required and women don’t want to have to prove they were raped
* Arbitrary gestational limits when women present for care
* Stigma and harassment
* All of the Above

1. True/False: Carrying a pregnancy to term is safer than having an abortion.

* True
* False
* Information to answer this question was not provided in the lecture.

1. True/False: There is a strong association between abortion restrictions and a high prevalence of unsafe abortions.

* True
* False
* Information to answer this question was not provided in the lecture.

1. What percentage of maternal deaths worldwide in 2013 was due to unsafe abortion?

* 5%
* 15%
* 30%
* 50%

1. What percentage of the world population live in countries where abortions are only legal to save the women’s life or prohibited altogether?

* 10%
* 25%
* 45%
* 60%

1. In countries where abortion is not legalized under any circumstance (like Brazil and other countries in Latin America), what is a safer method to self-induce abortion?

* The use of misoprostol
* Inserting foreign objects into the cervix
* Ingesting toxic substances
* All of the above are safe options

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1. Which of the following statements is/are true?

* In settings where abortion care is restricted, stigma can make it difficult for women to obtain accurate information
* Where abortion is legally restricted, safe abortion services are inexpensive, making them easily accessible to poor women
* Adequately trained abortion providers are often concentrated in rural areas, leaving women in urban areas with few options to access safe abortion care
* Mifepristone, the most effective abortion drug, is not available everywhere and manual vacuum aspiration equipment may be expensive or difficult to access

1. Safe later-term abortion services are not available in many settings because:

* There is a lack of trained providers in later-term abortions
* Later term abortion services are often concentrated in urban areas
* There is intensified stigma for later-term abortions
* All of the above

1. Which method of termination after the first trimester is conducted in an inpatient setting, is more dependent on nursing care, and may be more emotionally difficult for the patient?

* D&C (Dilation and Curettage)
* D&E (dilation and evacuation)
* Medical Induction
* None of the above

1. True/False: When analyzing delays to accessing abortion care in South Africa, studies have shown that there is a significantly longer delay between ultrasound to abortion for women who underwent medical induction than for women who underwent dilation and evacuation.

* True
* False
* Information to answer this question was not provided in the lecture.

1. The use of ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_ significantly shortens the median induction-to-delivery time to 5-7 hours vs. 11-15 hours

* Misoprostol alone
* Mifepristone alone
* Mifepristone and misoprostol
* Methotrexate and misoprostol
* Mifepristone and Methotrexate

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